

DECLARATION AND POWER OF ATTORNEY FOR ORIGINAL APPLICATION (Utility)

Attorneys

Docket No. TANDEM-1

As a below named inventor, I hereby declare that:

my residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Refuse Container Lid

the specification of which

X is attached hereto.

_____ was filed on _____, as Application Serial No. _____

_____ was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified Specification, including the Claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37 CFR 1.56.

I hereby claim foreign priority benefits under Title 35 USC 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

none

(Number)

(Country)

(Day/Month/Year Filed)

(Yes)

(No)

(Number)

(Country)

(Day/Month/Year Filed)

(Yes)

(No)

I hereby claim the benefit under Title 35 USC 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35 USC 112, I acknowledge the duty to disclose material information as defined in Title 37 CFR 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

none

(Appln. Serial No.)

(Filing Date)

(Status, i.e., patented, pending, abandoned)

(Appln. Serial No.)

(Filing Date)

(Status, i.e., patented, pending, abandoned)

I hereby appoint attorney CALIF KIP TERVO, REGISTRATION NO. 31,308 to transact all business in the U.S. Patent and Trademark Office connected with the prosecution of this application through issuance. This appointment is automatically revoked upon issuance of any patent resulting from this application.


Address all telephone calls to: CALIF KIP TERVO at Telephone No. (619) 234-4034

Address all correspondence to: CALIF KIP TERVO

6387 CAMINITO LAZARO


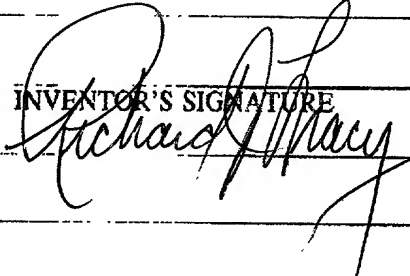
SAN DIEGO, CALIFORNIA 92111.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR Edward Eaton	INVENTOR'S SIGNATURE 	DATE 12-06-01
RESIDENCE: 60 Beech Drive, Apt. 60, Schaumburg, IL 60193	CITIZENSHIP U.S.A.	
POST OFFICE ADDRESS (IF DIFFERENT) 60 Beech Drive, Apt. 60, Schaumburg, IL 60193		

Page 2/DECLARATION AND POWER OF ATTORNEY FOR ORIGINAL APPLICATION (Utility) Attorneys

Docket No. TANDEM-1

FULL NAME OF SECOND JOINT INVENTOR, IF ANY E. Grant Swick	INVENTOR'S SIGNATURE 	DATE 12/7/01
RESIDENCE: 28W629 Stearns Road, Bartlett, IL 60103		CITIZENSHIP U.S.A.
POST OFFICE ADDRESS (IF DIFFERENT) 28W629 Stearns Road, Bartlett, IL 60103		
FULL NAME OF THIRD JOINT INVENTOR, IF ANY Richard J. Tracy	INVENTOR'S SIGNATURE 	DATE 12/7/01
RESIDENCE 1002 Forest Drive, Elgin, IL 60123		CITIZENSHIP U.S.A.
POST OFFICE ADDRESS (IF DIFFERENT) 1002 Forest Drive, Elgin, IL 60123		
FULL NAME OF FOURTH INVENTOR, IF ANY	INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS (IF DIFFERENT)		
FULL NAME OF FIFTH JOINT INVENTOR, IF ANY	INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS (IF DIFFERENT)		